

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WASHINGTON

LISA L. MILLER,	)	
	)	No. CV-10-00155-JPH
Plaintiff,	)	
	)	
v.	)	
	)	ORDER GRANTING DEFENDANT'S
MICHAEL J. ASTRUE,	)	MOTION FOR SUMMARY JUDGMENT
Commissioner of Social	)	
Security,	)	
	)	
Defendant.	)	

BEFORE THE COURT are cross-Motions for Summary Judgment. (ECF No. 14, 19.) Attorney Maureen J. Rosette represents Lisa L. Miller (Plaintiff); Special Assistant United States Attorney Franco L. Becia represents the Commissioner of Social Security (Defendant). The parties have consented to proceed before a magistrate judge. (ECF No. 8.) After reviewing the administrative record and briefs filed by the parties, the court **GRANTS** the Defendant's motion for Summary Judgment and **DENIES** Plaintiff's Motion for Summary Judgment.

**JURISDICTION**

Plaintiff protectively filed for disability insurance benefits (DIB) and Supplemental Security Income (SSI) on May 1, 2006. (Tr. 109.) She alleged disability due to "thyroid cancer, legs, fatigue, anxiety and depression," with an alleged onset date of May 1, 2003. (Tr. 101.) Her claim was denied initially and on reconsideration. Plaintiff requested a hearing before an administrative law judge (ALJ), which was held on January 16, 2008 before ALJ Paul L. Gaughen. (Tr. 23.)

1 Plaintiff, who was represented by counsel, and vocational expert  
2 Daniel McKinney, testified. (Tr. 25-51.) The ALJ denied benefits  
3 on May 1, 2008, and the Appeals Council denied review. (Tr. 13-22;  
4 1-3.) The instant matter is before this court pursuant to 42 U.S.C.  
5 § 405(g).

#### 6 **STATEMENT OF THE CASE**

7 The facts of the case are set forth in detail in the transcript  
8 of proceedings and are briefly summarized here. At the time of the  
9 hearing, Plaintiff was 38 years old with an eighth grade education.  
10 (Tr. 21; 32.) Plaintiff's past work experience includes working as  
11 a cocktail waitress, bartender, and a cook. (Tr. 41; 88-94.)

12 Plaintiff lives with her two children, her boyfriend and his  
13 mother. (Tr. 239.) Plaintiff testified that she cannot work due to  
14 her feet and her anxiety. (Tr. 33.) She explained that her "arches  
15 fell" and she eventually had surgery on her feet. (Tr. 33-34.)  
16 Plaintiff stated that even after surgery, her feet still swell,  
17 forcing her to elevate or soak them in water several times per day.  
18 (Tr. 34-35.) She said her anxiety makes her reluctant to leave her  
19 house, and being around the public makes her feel like she cannot  
20 breathe. (Tr. 35.) She reported she could perform activities of  
21 daily living and household chores at her own pace. (Tr. 36-37.)  
22 Plaintiff also said she can walk about four blocks, can pick up a  
23 bag of potatoes or a 12-pack of pop, can travel up and down stairs,  
24 and she can drive. (Tr. 39.)

#### 25 **SEQUENTIAL EVALUATION PROCESS**

26 The Social Security Act (the Act) defines disability as the  
27 "inability to engage in any substantial gainful activity by reason  
28 of any medically determinable physical or mental impairment which

1 can be expected to result in death or which has lasted or can be  
2 expected to last for a continuous period of not less than twelve  
3 months." 42 U.S.C. §§ 423(d)(1)(A), 1382c(a)(3)(A). The Act also  
4 provides that a Plaintiff shall be determined to be under a  
5 disability only if any impairments are of such severity that a  
6 plaintiff is not only unable to do previous work but cannot,  
7 considering plaintiff's age, education and work experiences, engage  
8 in any other substantial gainful work which exists in the national  
9 economy. 42 U.S.C. §§ 423(d)(2)(A), 1382c(a)(3)(B). Thus, the  
10 definition of disability consists of both medical and vocational  
11 components. *Edlund v. Massanari*, 253 F.3d 1152, 1156 (9<sup>th</sup> Cir. 2001).

12 The Commissioner has established a five-step sequential  
13 evaluation process for determining whether a person is disabled. 20  
14 C.F.R. §§ 404.1520, 416.920. Step one determines if the person is  
15 engaged in substantial gainful activities. If so, benefits are  
16 denied. 20 C.F.R. §§ 404.1520(a)(4)(I), 416.920(a)(4)(I). If not,  
17 the decision maker proceeds to step two, which determines whether  
18 plaintiff has a medically severe impairment or combination of  
19 impairments. 20 C.F.R. §§ 404.1520(a)(4)(ii), 416.920(a)(4)(ii).

20 If plaintiff does not have a severe impairment or combination  
21 of impairments, the disability claim is denied. If the impairment is  
22 severe, the evaluation proceeds to the third step, which compares  
23 plaintiff's impairment with a number of listed impairments  
24 acknowledged by the Commissioner to be so severe as to preclude  
25 substantial gainful activity. 20 C.F.R. §§ 404.1520(a)(4)(ii),  
26 416.920(a)(4)(ii); 20 C.F.R. § 404 Subpt. P, App. 1. If the  
27 impairment meets or equals one of the listed impairments, plaintiff  
28 is conclusively presumed to be disabled. If the impairment is not

1 one conclusively presumed to be disabling, the evaluation proceeds  
2 to the fourth step, which determines whether the impairment prevents  
3 plaintiff from performing work which was performed in the past. If  
4 a plaintiff is able to perform previous work, that Plaintiff is  
5 deemed not disabled. 20 C.F.R. §§ 404.1520(a)(4)(iv),  
6 416.920(a)(4)(iv). At this step, plaintiff's residual functional  
7 capacity (RFC) assessment is considered. If plaintiff cannot perform  
8 this work, the fifth and final step in the process determines  
9 whether plaintiff is able to perform other work in the national  
10 economy in view of plaintiff's residual functional capacity, age,  
11 education and past work experience. 20 C.F.R. §§ 404.1520(a)(4)(v),  
12 416.920(a)(4)(v); *Bowen v. Yuckert*, 482 U.S. 137 (1987).

13 The initial burden of proof rests upon plaintiff to establish  
14 a *prima facie* case of entitlement to disability benefits. *Rhinehart*  
15 *v. Finch*, 438 F.2d 920, 921 (9<sup>th</sup> Cir. 1971); *Meanel v. Apfel*, 172  
16 F.3d 1111, 1113 (9<sup>th</sup> Cir. 1999). The initial burden is met once  
17 plaintiff establishes that a physical or mental impairment prevents  
18 the performance of previous work. *Hoffman v. Heckler*, 785 F.3d 1423,  
19 1425 (9<sup>th</sup> Cir. 1986). The burden then shifts, at step five, to the  
20 Commissioner to show that (1) plaintiff can perform other  
21 substantial gainful activity and (2) a "significant number of jobs  
22 exist in the national economy" which plaintiff can perform. *Kail v.*  
23 *Heckler*, 722 F.2d 1496, 1498 (9<sup>th</sup> Cir. 1984); *Tackett v. Apfel*, 180  
24 F.3d 1094, 1099 (1999).

#### 25 ADMINISTRATIVE DECISION

26 ALJ Gaughen found Plaintiff was insured for DIB through June  
27 30, 2005. (Tr. 15.) At step one, the ALJ found Plaintiff had not  
28 engaged in substantial gainful activity since May 1, 2003, the

1 alleged onset date. (*Id.*) At step two, he found Plaintiff had  
2 severe impairments of "bilateral gastroc equinus, resulting in  
3 bilateral plantar fasciitis, bilateral ankle instability, dysthymia,  
4 and posttraumatic stress disorder (PTSD)." (Tr. 16.) He concluded  
5 recently diagnosed mental impairments were not severe. (Tr. 23.)  
6 The ALJ determined at step three Plaintiff's medically determinable  
7 impairments, alone and in combination, did not meet or medically  
8 equal one of the listed impairments in 20 C.F.R., Appendix 1,  
9 Subpart P, Regulations No. 4 (Listings). (Tr. 16.) The ALJ found  
10 Plaintiff's subjective complaints regarding functional limitations  
11 were not fully credible. (Tr. 18.) At step four, the ALJ concluded  
12 plaintiff's residual functional capacity was light exertion work:

13       The claimant can lift or carry up to 20 pounds  
14       occasionally, and frequently lift or carry 10 pounds. The  
15       claimant can sit for a total of six hours and stand or  
16       walk for a total of four hours in an eight-hour workday.  
17       She could stand for about one hour at a time and she could  
18       walk for about 1/4 to 1/2 mile at a time. The claimant  
19       has good use of her arms and hands for repetitive  
20       grasping, holding and turning objects. She can  
21       occasionally perform such postural activities as  
22       balancing, stooping, kneeling, crouching, crawling and  
23       climbing. However, the claimant can less than  
24       occasionally squat or perform other similar postures that  
25       would place stress on the ankles. She may exhibit slight  
26       limitation in highly engaging social interaction or in  
27       maintaining her pace.

21 (Tr. 17.) The ALJ concluded that Plaintiff was unable to perform  
22 her past relevant work. (Tr. 21.) After taking into account  
23 Plaintiff's age, education, work experience, residual functional  
24 capacity and the testimony of a vocational expert, the ALJ concluded  
25 jobs that the Plaintiff can perform, such as assembly worker,  
26 product inspector and hand packer, exist in significant numbers in  
27 the national economy. (Tr. 21-22.) As a result, the ALJ concluded  
28 Plaintiff has not been under a disability as defined in the Social

1 Security Act since May 1, 2006, the date the application was filed.  
2 (Tr. 28.)

3 **STANDARD OF REVIEW**

4 Congress has provided a limited scope of judicial review of a  
5 Commissioner's decision. 42 U.S.C. § 405(g). A Court must uphold  
6 the Commissioner's decision, made through an ALJ, when the  
7 determination is not based on legal error and is supported by  
8 substantial evidence. *See Jones v. Heckler*, 760 F.2d 993, 995 (9<sup>th</sup>  
9 Cir. 1985); *Tackett*, 180 F.3d at 1097 (9<sup>th</sup> Cir. 1999). "The  
10 [Commissioner's] determination that a plaintiff is not disabled  
11 will be upheld if the findings of fact are supported by  
12 substantial evidence." *Delgado v. Heckler*, 722 F.2d 570, 572 (9<sup>th</sup>  
13 Cir. 1983)(citing 42 U.S.C. § 405(g)). Substantial evidence is  
14 more than a mere scintilla, *Sorenson v. Weinberger*, 514 F.2d 1112,  
15 1119 n. 10 (9<sup>th</sup> Cir. 1975), but less than a preponderance.  
16 *McAllister v. Sullivan*, 888 F.2d 599, 601-602 (9<sup>th</sup> Cir. 1989);  
17 *Desrosiers v. Secretary of Health and Human Services*, 846 F.2d  
18 573, 576 (9<sup>th</sup> Cir. 1988). Substantial evidence "means such  
19 evidence as a reasonable mind might accept as adequate to support  
20 a conclusion." *Richardson v. Perales*, 402 U.S. 389, 401 (1971)  
21 (citations omitted). "[S]uch inferences and conclusions as the  
22 [Commissioner] may reasonably draw from the evidence" will also be  
23 upheld. *Mark v. Celebrezze*, 348 F.2d 289, 293 (9<sup>th</sup> Cir. 1965). On  
24 review, the Court considers the record as a whole, not just the  
25 evidence supporting the decision of the Commissioner. *Weetman v.*  
26 *Sullivan*, 877 F.2d 20, 22 (9<sup>th</sup> Cir. 1989)(quoting *Kornock v.*  
27 *Harris*, 648 F.2d 525, 526 (9<sup>th</sup> Cir. 1980)).

28 It is the role of the trier of fact, not this Court, to

1 resolve conflicts in evidence. *Richardson*, 402 U.S. at 400. If  
2 evidence supports more than one rational interpretation, the Court  
3 may not substitute its judgment for that of the Commissioner.  
4 *Tackett*, 180 F.3d at 1097; *Allen v. Heckler*, 749 F.2d 577, 579  
5 (9<sup>th</sup> Cir. 1984). Nevertheless, a decision supported by substantial  
6 evidence will still be set aside if the proper legal standards  
7 were not applied in weighing the evidence and making the decision.  
8 *Browner v. Secretary of Health and Human Services*, 839 F.2d 432,  
9 433 (9<sup>th</sup> Cir. 1987). Thus, if there is substantial evidence to  
10 support the administrative findings, or if there is conflicting  
11 evidence that will support a finding of either disability or  
12 nondisability, the finding of the Commissioner is conclusive.  
13 *Sprague v. Bowen*, 812 F.2d 1226, 1229-1230 (9<sup>th</sup> Cir. 1987).

#### 14 ISSUES

15 The question is whether the ALJ's decision is supported by  
16 substantial evidence and free of legal error. Plaintiff argues the  
17 ALJ's credibility determination was erroneous because it was not  
18 supported by specific, clear and convincing reasons. Plaintiff also  
19 argues the hypothetical did not adequately address her psychological  
20 impairments. (ECF No. 15 at 15; 17.) Defendant contends the ALJ's  
21 decision is supported by substantial evidence and is free of legal  
22 error. (ECF No. 20 at 8-14.)

#### 23 DISCUSSION

##### 24 A. Credibility

25 Plaintiff contends insufficient evidence exists to support the  
26 ALJ's decision. She contends that she is more physically limited  
27 than the ALJ determined, and that she is disabled due to the  
28

1 impairments related to her feet and her anxiety.<sup>1</sup> (ECF No. 15 at 11.)  
2 She argues medical evidence supports her physical impairment, and the  
3 ALJ erred by failing to credit her testimony about the severity of  
4 her pain. (ECF No. 15 at 13; 15.) Plaintiff also alleges that the  
5 ALJ erred by failing to identify particular facts that supported the  
6 negative credibility finding. (ECF No. 15 at 15.)

7 It is the province of the ALJ to make credibility  
8 determinations. *Andrews v. Shalala*, 53 F.3d 1035, 1039 (9th Cir.  
9 1995). However, the ALJ's findings must be supported by specific  
10 cogent reasons. *Rashad v. Sullivan*, 903 F.2d 1229, 1231 (9th Cir.  
11 1990). Once the claimant produces medical evidence of an underlying  
12 medical impairment, the ALJ may not discredit testimony as to the  
13 severity of an impairment because it is unsupported by medical  
14 evidence. *Reddick v. Chater*, 157 F.3d 715, 722 (9th Cir. 1998).  
15 Absent affirmative evidence of malingering, the ALJ's reasons for

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16 1

17 Plaintiff also contends that the ALJ's decision was based in error  
18 because she has objective medical evidence of a cervical spine  
19 impairment. Plaintiff points to an MRI that showed mild spondylosis  
20 with decreased disc space height and endplate changes. (ECF No. 15  
21 at 11-12.) But Plaintiff fails to provide any briefing or  
22 explanation as to how the cervical spine impairment manifests in  
23 symptoms that contribute to an alleged disability. The court is  
24 unable to consider matters that are not "specifically and distinctly  
25 argued" in a party's brief. *Carmickle v. Commissioner, Soc. Security*  
26 *Admin.*, 533 F.3d 1155, 1161 n. 2 (9th Cir.2008). In the absence of  
27 applicable legal argument or analysis, the court will not address  
28 this issue.



rejecting the claimant's testimony must be "clear and convincing." *Lester v. Chater*, 81 F.3d 821, 834 (9th Cir. 1995). "General findings are insufficient: rather the ALJ must identify what testimony is not credible and what evidence undermines the claimant's complaints." *Lester*, 81 F.3d at 834; *Dodrill v. Shalala*, 12 F.3d 915, 918 (9th Cir. 1993).

In weighing credibility, the ALJ considers factors including: the nature, location, onset, duration, frequency, radiation, and intensity of any pain; precipitating and aggravating factors (e.g., movement, activity, environmental conditions); type, dosage, effectiveness, and adverse side effects of any pain medication; treatment, other than medication, for relief of pain; functional restrictions; the claimant's daily activities; and "ordinary techniques of credibility evaluation." *Bunnell v. Sullivan*, 947 F.2d 341, 346 (9th Cir. 1991)(citing Social Security Ruling ("SSR") 88-13; quotation marks omitted). The ALJ may also consider an unexplained failure to seek treatment. *Thomas v. Barnhart*, 278 F.3d 947, 958-59 (9th Cir. 2002).

Contrary to Plaintiff's assertions, the ALJ provided specific reasons for discrediting her claims about the severity of her pain. First, the ALJ noted that Plaintiff was fitted for orthotics in 2001, but she did not seek treatment again until July, 2006. (Tr. 18; 283.) Additionally, the ALJ noted that Plaintiff continued working through 2003, and did not seek additional treatment on her feet for approximately three years. The ALJ concluded that these facts indicated that at the time Plaintiff alleged her disability commenced (2003), it is likely even Plaintiff did not feel her symptoms were severe, since she did not seek treatment and continued

working. (Tr. 18.)

Second, the ALJ found that Plaintiff's symptoms related to her bilateral foot and ankle impairment were adequately remedied by her surgeries. The ALJ noted that the records from May 2007 reveal that Plaintiff recovered as expected, and she reported feeling better. (Tr. 19; Tr. 297-308.)

Finally, ALJ also relied upon the fact that Plaintiff uses no pain medication as evidence that she is no longer experiencing limiting pain. Additionally, Plaintiff's daily activities are not as limited as would be expected, given the severity of her complaints. (Tr. 19-20.)

In this case, the ALJ's conclusions are specific, and supported by the record. The Plaintiff provided scant medical records from 2003-2005, and none appeared related to her feet. (See, e.g., Tr. 198; 201; 205.) She testified at the hearing that around 2004, her mother died, she was diagnosed with thyroid cancer, and her "feet went bad." (Tr. 40-41.) Plaintiff testified that at the time, she was waitressing, but that "came to an end when I couldn't do anything more, my feet, I was living on pain pills to get through and it was just all, I would sleep and eat pain pills to get through a day." (Tr. 41.)

In 2006-07 Plaintiff had two surgeries to correct the problems with her feet. As she recovered, Plaintiff requested decreased doses of pain medications. (Tr. 297-308.) On March 12, 2007, Plaintiff told her doctors that her left ankle felt "great" and that she was ready for surgery on her right. (Tr. 369.) On May 3, 2007, after surgery on the right, Plaintiff reported the ankle was "doing good" and was sore only around the sutures. (Tr. 380.) About a week later,

she related to her doctor that her pain was getting better, but she still needed a prescription for pain medication. (Tr. 381.) But two months later, Plaintiff reported to Dr. Brim that her foot was swollen, her ankles felt unstable, and physical therapy did not seem to help. (Tr. 384.)

In August, 2007, Plaintiff asked Dr. Brim to write a statement for her disability claim. (Tr. 385.) Based upon his conversation with Plaintiff, Dr. Brim wrote a letter indicating that Plaintiff has increased stability in her ankles after surgery, but she continues to experience pain after standing and walking for approximately two hours. Dr. Brim concluded: "At this point, she should be able to stand/walk for up to four to five hours per day in a work week. I do not believe that she will progress beyond this because of the foot and ankle pathologies." (Tr. 353.)

Contrary to Plaintiff's claim, Dr. Brim does not endorse Plaintiff's self-reported limitation that she must elevate her feet 4-5 times per day for up to 45 minutes at a time. Dr. Brim merely notes that Plaintiff's ankles were improved after surgery, and she should be able to walk and/or stand for up to four to five hours per day in a work week.

The ALJ also noted that Plaintiff does not use pain relievers, which detrimentally affects her credibility related to her pain complaints. The amount of treatment Plaintiff received is a permissible consideration in credibility findings. See *Parra v. Astrue*, 481 F.3d 742, 751 (9th Cir. 2007) ("evidence of 'conservative treatment' is sufficient to discount a claimant's testimony regarding severity of an impairment"). An ALJ may also discredit subjective pain complaints where the claimant received

1 "minimal" and "conservative" treatment. *Meanel v. Apfel*, 172 F.3d at  
2 1114. In this case, Plaintiff's allegations that she suffers from  
3 disabling pain is undermined by her failure to seek treatment or use  
4 medications. The ALJ appropriately used this factor in determining  
5 that Plaintiff's diminished credibility.

6 Finally, the ALJ noted that Plaintiff's daily activities do not  
7 appear as limited as expected, given the intensity of pain alleged  
8 by Plaintiff. (Tr. 20.) The record reveals that Plaintiff cares for  
9 her young children, dog and boyfriend, completes household tasks  
10 including laundry, preparation of meals, grocery shopping, and can  
11 lift up to 20 pounds. (Tr. 36-38; 240;) She also attends school  
12 functions with the children, and in 2006, Plaintiff attended GED  
13 classes from 9:00 a.m. to 2:00 p.m. daily, and Plaintiff admitted  
14 that she can pay attention for a long time. (Tr. 240.)

15 It is well-established that the nature of daily activities may  
16 be considered when evaluating credibility. *Fair v. Bowen*, 885 F.2d  
17 597, 603 (9th Cir. 1989). Activities such as caring for young  
18 children may undermine claims of disabling impairment. See *Rollins*  
19 *v. Massanari*, 261 F.3d 853, 857 (9th Cir.2001). Here, the record  
20 supports the ALJ's observations that Plaintiff's daily activities  
21 are inconsistent with Plaintiff's claims of disabling pain. This is  
22 a proper factor to consider in determining credibility.

23 If properly supported, the ALJ's credibility determination is  
24 entitled to "great deference." See *Green v. Heckler*, 803 F.2d 528,  
25 532 (9th Cir. 1986). Where the ALJ makes a careful consideration of  
26 subjective complaints but provides adequate reasons for rejecting  
27 them, the ALJ's well-settled role as the judge of credibility will  
28 be upheld as based on substantial evidence. *Matthews v. Shalala*, 10

F.3d 678, 679-80 (9th Cir. 1993). The facts in this record - Plaintiff waited three years to seek treatment; she had surgery on each foot and recovered well; and she no longer needs pain medication - were properly considered, and constitute clear and convincing reasons for finding Plaintiff's subjective complaints lacked credibility.

## **2. Anxiety.**

Plaintiff contends that the ALJ erred by failing to incorporate into the hypothetical all of her mental limitations. In support of greater limitations, she cites her own testimony, the records from Spokane Mental Health that indicate Plaintiff was being treated for major depressive disorder, posttraumatic stress syndrome and borderline personality disorder. (ECF No. 15 at 16.) She also asserts that the hypothetical failed to include Dr. Severinghaus's assessed limitations of occasional problems with attention, concentration, and memory. (ECF No. 15 at 17.)

Plaintiff relies upon the records from her treatment with Spokane Mental Health ("SMH") in arguing that she suffers from severe mental impairments. But the ALJ discounted the records from SMH because Plaintiff did not seek treatment until December, 2006, several months after she underwent a psychiatric evaluation on behalf of the State related to her social security disability application. The ALJ noted that while Plaintiff complained to SMH of severe symptoms, she failed to present any of these severe symptoms in her initial psychological evaluation. Additionally, Plaintiff attended only a few counseling sessions. The ALJ concluded that it appeared Plaintiff was consciously attempting to portray non-existent limitations in order to generate evidence for her social

security disability application and appeal. (Tr. 19.)

Credibility determinations are the province of the ALJ. *Russell v. Bowen*, 856 F.2d 81, 83 (9th Cir. 1988). In this instance, the ALJ properly relied upon Plaintiff's inconsistent complaints, the suspect timing, and her failure to pursue treatment in determining Plaintiff's negative credibility. Where, as here, the ALJ offered specific, clear and convincing reasons for discounting Plaintiff's subjective pain testimony, and substantial evidence in the record supports those findings, the ALJ's decision must be upheld. *Fair v. Bowen*, 885 F.2d 597, 604 (9th Cir. 1989).

Plaintiff also asserts that the hypothetical failed to incorporate her mental limitations as assessed by Dr. Severinghaus. She argues that Dr. Severinghaus opined that she would experience occasional glitches in attention and concentration, along with memory problems, and "occasional" means 1/3 of the day to "most vocational experts." (ECF No. 15 at 17.)

A hypothetical question posed to a vocational expert must contain "all of the limitations and restrictions" that are supported by substantial evidence. *Magallanes v. Bowen*, 881 F.2d 747, 756 (9th Cir. 1989); see also *Rollins v. Massanari*, 261 F.3d 853, 863 (9th Cir. 2001). "If the record does not support the assumptions in the hypothetical, the vocational expert's opinion has no evidentiary value." *Lewis v. Apfel*, 236 F.3d 503, 517 (9th Cir. 2001).

Notwithstanding Plaintiff's assertions to the contrary, Dr. Severinghaus' limitations were incorporated into the hypothetical. Dr. Severinghaus found Plaintiff had "no evidence of impaired memory other than occasional forgetfulness related to stress and depression. Attention and concentration are intact overall, with

again some occasional glitches related to anxiety and depression....  
Pace and persistence seem fairly intact...." (Tr. 241.)

1 The hypothetical included:

2 She has no disabling mental health impairments, but due to  
3 some anxiety component, etcetera, at work center she may  
4 exhibit slight only limitations in highly engaging social  
5 interaction or in maintaining her pace in workman like  
6 activities during the work day. These are slight  
7 limitations only. She can perform basic functions of the  
8 job relative to her cognition and social skills, has no  
9 thought disorder.

10 (Tr. 42-43.) The hypothetical explicitly addressed Plaintiff's  
11 slight limitations in maintaining pace.

12 But Plaintiff argues that Dr. Severinghaus's use of the word  
13 "occasional" meant that Plaintiff would experience a "glitch" up to  
14 one-third of the day. (ECF NO. 15 at 17.) This argument is  
15 problematic. First, Dr. Severinghaus is a doctor, not a vocational  
16 expert and thus resorting to the general definition allegedly used  
17 by vocational experts to interpret Dr. Severinghaus's definition is  
18 not meaningful.

19 Second, Plaintiff's assertion is without citation to legal  
20 authority and is lacks foundation in the record. It is not apparent  
21 in the record that Dr. Severinghaus was attempting to use the word  
22 "occasional" as a term of art as used by the vocational experts.  
23 Moreover, while Dr. Severinghaus provided no quantitative testimony  
24 related to what he meant by "occasional," the use of the word  
25 "glitch" implies that the interruptions Plaintiff might experience  
26 would be brief.<sup>2</sup> Plaintiff's assertions that her mental impairments  
27 would preclude her from working for one-third of the workday is not

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28 <sup>2</sup>"Glitch" is defined by Merriam-Webster as "a usually minor  
malfunction." <http://www.merriam-webster.com/dictionary/glitch>.

1 well taken. By contrast, the record supports the ALJ's determination  
2 that Plaintiff could have slight difficulties in maintaining a  
3 workman like pace during the workday is supported by Dr.  
4 Severinghaus's notes in the record. The ALJ properly included Dr.  
5 Severinghaus' limitations in the hypothetical given to the  
6 vocational expert.

7 Having reviewed the record and the ALJ's conclusions, this  
8 court finds that the ALJ's decision is free of legal error and  
9 supported by substantial evidence.

10 **IT IS ORDERED:**

11 1. Defendant's Motion for Summary Judgment (**ECF No. 20.**) is  
12 **GRANTED.**

13 2. Plaintiff's Motion for Summary Judgment (**ECF No. 15.**) is  
14 **DENIED.**

15 The District Court Executive is directed to file this Order and  
16 provide a copy to counsel for Plaintiff and Defendant. Judgment  
17 shall be entered for **DEFENDANT** and the file shall be **CLOSED**.

18 DATED July 29th, 2011.

19 S/JAMES P. HUTTON  
20 UNITED STATES MAGISTRATE JUDGE  
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